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	FILED
<u></u>	JUL 27 2017
RPAF	UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF CALIFORNIA
	40,00
	Check if this is an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting	ARMANDO First name E. Middle name ZAVALA Last name	First name  Middle name  Last name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	First name	First name
	years Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
jen sesto	等的 基本 克朗斯斯特拉特 2000年 1200年 1	在图像是全种的,我们是一种,因为工工,但是这种的,我们就是这种的,我们就是这种的,我们就是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一	· 沙沙小哥,不仅仅是他们是我们的人都看了她的时候是我们的一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>1</u> <u>1</u> <u>7</u> <u>1</u>	XXX - XX
	number or federal Individual Taxpayer Identification number (ITIN)	OR 9 xx - xx	9 xx - xx -

Debtor 1 ARMANDO E First Name Middle Na		ase number (# known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
i. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live	CHANGEMENTE NE RECOGNISSES THAT THE CHANGE SERVICE PROMET PROMET THE CHANGE SERVICE SERVICE CONTRACT C	If Debtor 2 lives at a different address:
	1520 PIONEER AVE.  Number Street	Number Street
	PORTERVILLE CA 93257	
	City State ZIP Code	City State ZIP Code
	TULARE County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street

P.O. Box

City State ZIP Code

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	
	_

Check one:

1	Over the last 180 days before filing this petition,
	I have lived in this district longer than in any
	other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)	

<b>ARMAN</b>	DO E. ZA	VALA	
First Name	Middle Name	Last Name	

Case number	(if known)
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District	Pa	Tell the Court Abou	t Your Ba	nkrupte	cy Case			
are choosing to file under  Chapter 1 Chapter 11 Chapter 12 Chapter 13  I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.  2 I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for Chapter 7 By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments, if you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.  9. Have you filed for bankruptcy cases pending or being being the paying the fee waived (Official Form 103B) and file it with your petition.  10. Are any bankruptcy cases pending or being being being the paying the fee waived (Official Form 103B) and file it with your petition.  11. Do you rent your residence?  12. No. Go to line 12.  13. No. Go to line 12.  14. Yes. Fill out initial Statement About an Eviction Judgment Against You (Form 101A) and file it with your petition.	7.		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
Chapter 12   Chapter 12   Chapter 13     Alwayou will pay the fee   I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.    I need to pay the fee in installments, if you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).   I request that my fee be waived (You may request this option only if you are filing for Chapter 7 By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments, if you hoose this option, you must fill out you must you must you must you you fee, and may do so only if you income is less than 150% of the official poverty fill you will not you must fill out you must fill out you will not you you must fill out you must you you must fill out you must fill		are choosing to file	☑ Chap	er 7				
Chapter 13		under	☐ Chap	er 11				
Chapter 13			·					
8. How you will pay the fee			,					
local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order, if your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.    I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).    I request that my fee be waived (You may request this option only if you are filing for Chapter 7 By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family see and you are mable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.    When	٠.	and the second second second second			· · · · · · · · · · · · · · · · · · ·			and the second of the second o
Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).    I request that my fee be waived (You may request this option only if you are filing for Chapter 7 By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Walved (Official Form 103B) and file it with your petition.  9. Have you filed for bankruptcy within the last 8 years?    I No	8.	How you will pay the fee	local yours subm	court fo elf, you itting yo	or more details ab u may pay with ca our payment on y	out how you ma sh. cashier's ch	ay pay. Typically neck, or money	y, if you are paying the fee order. If your attorney is
By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.  9. Have you filed for bankruptcy within the last 8 years?    Institut		÷.	☑ I nee Appli	d to pa	y the fee in insta for Individuals to I	allments. If you Pay The Filing I	i choose this op Fee in Installmei	tion, sign and attach the nts (Official Form 103A).
bankruptcy within the last 8 years?  District When MM / DD / YYYY  District When MM / DD / YYYYY  District When MM / DD / YYYYY  Case number  Relationship to you  District When MM / DD / YYYY  Debtor  District When Relationship to you  Case number, if known  Relationship to you  Case number, if known  Case number, if known  No. Case number, if known  No. Go to line 12.  Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.			By la less i	w, a jud han 15 he fee i	dge may, but is no 60% of the official in installments). If	ot required to, we poverty line that for the following the	vaive your fee, a at applies to you is option, you m	and may do so only if your income is rfamily size and you are unable to ust fill out the <i>Application to Have the</i>
bankruptcy within the last 8 years?  District When MM / DD / YYYY  District When MM / DD / YYYYY  District When MM / DD / YYYYY  District When MM / DD / YYYYY  Case number  Relationship to you  District When MM / DD / YYYYY  Debtor Case number, if known  District When Relationship to you  Case number, if known  No Debtor Relationship to you  Case number, if known  No Debtor Relationship to you  Case number, if known  No Debtor Relationship to you  Case number, if known  No Debtor Relationship to you  Case number, if known  No Debtor Relationship to you  Case number, if known  No Debtor Relationship to you  Case number Relationship to you  Debtor Relationship to you  Case number Relationship to you  Debtor Relationship to you  Case number Relationship to you  If yes, Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.								
District	9.	Have you filed for bankruptcy within the						Casa number
District			☐ Yes.	District		vvnen	MM / DD / YYYY	Case number
District				District		When	444 / DD / XXXX	Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District When MM / DD / YYYY  Relationship to you Case number, if known MM / DD / YYYY  Debtor District When MM / DD / YYYY  Case number, if known MM / DD / YYYY  11. Do you rent your residence?  No. Go to line 12. As your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12. As your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12. As your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12. As your landlord obtained an eviction judgment against you and do you want to stay in your residence? As your landlord obtained an eviction judgment against you (Form 101A) and file it with this bankruptcy petition.				District		\//hen		Case number
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor				District		VIIICII	MM / DD / YYYY	
filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor  District  When  Case number, if known  MM / DD / YYYY  Debtor  District  When  Relationship to you  Relationship to you  Case number, if known  MM / DD / YYYY   11. Do you rent your residence?  No. Go to line 12.  Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12.  Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.	1		<b>☑</b> No				at an an analysis of the second	
not filing this case with you, or by a business partner, or by an affiliate?  Debtor District When Relationship to you Case number, if known MM / DD / YYYY  Relationship to you Case number, if known MM / DD / YYYYY  11. Do you rent your residence?  No. Go to line 12. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.			Yes.	Debtor				Relationship to you
Debtor		not filing this case with you, or by a business partner, or by an		District		When	MM / DD / YYYY	Case number, if known
11. Do you rent your residence?  No. Go to line 12. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.		annace.		Debtor				Relationship to you
11. Do you rent your residence?  No. Go to line 12. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12.  No. Go to line 12.  Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.				District			MM / DD / YYYY	•
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.	1			Has yo	our landlord obtaine			
this bankruptcy petition.				☑ No	o. Go to line 12.			
							Eviction Judgmer	nt Against You (Form 101A) and file it with
	1			uni	is nativitables helitic	,		

ARMA	NDO E.	ZAVALA	
First Name	Middle Name	Last Name	

Part 3:		
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## Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

🛮 No. Go	o to Part 4.			
🗖 Yes. N	lame and location of business			
Ν	lame of business, if any			
ī	Number Street			
٠ -				<del>, ,</del>
-	City	State	ZIP Code	
(	Check the appropriate box to describe your business.	<i>:</i>		
Ţ	☐ Health Care Business (as defined in 11 U.S.C. §	101(27A))		
(	☐ Single Asset Real Estate (as defined in 11 U.S.C.	. § 101(51B	9))	
[	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))	•		
Į	Commodity Broker (as defined in 11 U.S.C. § 101	1(6))		
(	☐ None of the above			

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4:

## Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☑ No ☐ Yes.	What is the hazard?		and the second s	—
	If immediate attention is	needed, why is it needed?		_
	Where is the property?	Number Street		

City

ZIP Code

State

ARMANDO E. ZAVALA

Case number	(if known)	
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#### Part 5:

## **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor 1	ı
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You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

ARMA	NDO E.	ZAVALA
Cient Manna	Middle Mame	Last Name

Case number	(if known)_			
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Part 6: Answer These Ques	stions for Reporting Purpose	es	
16. What kind of debts do	16a. Are your debts primaril	ly consumer debts? Consumer debts ly primarily for a personal, family, or hou	ots are defined in 11 U.S.C. § 101(8) sehold purpose."
you have?	<ul><li>No. Go to line 16b.</li><li>✓ Yes. Go to line 17.</li></ul>		
	16b. <b>Are your debts primaril</b> money for a business or inv	ly business debts? Business debts estment or through the operation of the	are debts that you incurred to obtain business or investment.
	☐ No. Go to line 16c. ☐ Yes. Go to line 17.		
	16c. State the type of debts you	owe that are not consumer debts or bu	siness debts.
17. Are you filing under Chapter 7?	☐ No. I am not filing under Cha	apter 7. Go to line 18.	
Do you estimate that after any exempt property is	Yes. I am filing under Chapte administrative expenses	er 7. Do you estimate that after any exe s are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?
excluded and	☑ No		
administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes		
18. How many creditors do	<b>☑</b> 1-49	1,000-5,000	<b>2</b> 5,001-50,000
you estimate that you	50-99	5,001-10,000	50,001-100,000
owe?	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000
19. How much do you	<b>2</b> \$0-\$50,000	☐ \$1,000,001-\$10 million	\$500,000,001-\$1 billion
estimate your assets to be worth?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
De Worth.	\$100,001-\$500,000 \$500,001-\$1 million	\$100,000,001-\$100 million	☐ More than \$50 billion
20. How much do you	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion
estimate your liabilities to be?	□ \$50,001-\$100,000 □ \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
	\$500,001-\$300,000	□ \$100,000,001-\$500 million	More than \$50 billion
Part 7: Sign Below			
For you	I have examined this petition, an correct.	nd I declare under penalty of perjury tha	at the information provided is true and
		apter 7, I am aware that I may proceed understand the relief available under e	, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed
	If no attorney represents me and this document, I have obtained a	d I did not pay or agree to pay someone and read the notice required by 11 U.S.	e who is not an attorney to help me fill out C. § 342(b).
	I request relief in accordance with	th the chapter of title 11, United States	Code, specified in this petition.
	I understand making a false stat with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, a	ult in fines up to \$250,000, or imprisonn	ng money or property by fraud in connection nent for up to 20 years, or both.
	* A E 3	*	
	Signature of Debtor 1	Signatu	re of Debtor 2
	Executed on 07 245	2017 Execut	ed on
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ARMANDO E.	ZAVALA	

Case number (if known)		
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

PRO SE	Date			
Signature of Attorney for Debtor		MM	/ DD	/ YYYY
Printed name				
Firm name				
Number Street				
	,			
City	State	ZIP Co	de	
Contact phone	Email addres	ss		
Bar number	State			

ARMANDO E. ZAVALA

irst Name Middle Name

Last Name

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?
□ No
☑ Yes
Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?
□ No
☑ Yes
Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?  No
Yes. Name of Person KAREN ACORD
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

x A & 3-	_ ×
Signature of Debtor 1	Signature of Debtor 2
Date 07 14 2017 MM / DD / YYYY	Date MM / DD / YYYY
Contact phone (559) 350-4162	Contact phone
Cell phone (559) 350-4162	Cell phone
Email address	Email address

Certificate Number: 15317-CAE-CC-029476512



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on June 24, 2017, at 4:15 o'clock PM PDT, Armando E Zavala received from Access Counseling, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: June 24, 2017 By: /s/Mariel Macrohon

Name: Mariel Macrohon

Title: Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill in this information to identify your case:					
Debtor 1	ARMANDO	E. ZAVALA			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Eastern District of California					
Case number					
Gudo Humbo.	(If known)				

# ☐ Check if this is an amended filing

# Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 25,218.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 25,218.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 33,306.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$2,159.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$4,663.00
Your total liabilities	\$ 40,128.00
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,038.42
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	s 4,038.00

ARMANDO	Ε.	ZAVALA

irst Name Middle Name

ı	ant Marsa	

Case number (	if tenouse)		
Case Hullinei (	# KHOWH)	 	 

0.00

0.00

2,159.00

Pa	art 4:	Answer These Questions for Administrative and Statistical Records				
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?				
	☐ No ☑ Ye	. You have nothing to report on this part of the form. Check this box and submit this for s	m to the cou	rt with your other	schedules	3.
7.	What k	kind of debt do you have?				
	<b>☑</b> Yo	our debts are primarily consumer debts. Consumer debts are those "incurred by an in mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	ndividual prir es. 28 U.S.C	marily for a perso . § 159.	nal,	
		our debts are not primarily consumer debts. You have nothing to report on this part of some to the court with your other schedules.	of the form. (	Check this box ar	nd submit	
		The second secon	•			same
8.	From Form	the Statement of Your Current Monthly Income: Copy your total current monthly income: 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ome from Of	ficial	\$	5,504.82
9.	Copy	the following special categories of claims from Part 4, line 6 of Schedule E/F:	v	agaman ya manana ya kasa a		PROCESSION OF THE PROCESSION O
· · · · · · · · · · · · · · · · · · ·			Total cla	aim		
and decidence of the control of the	Fror	m Part 4 on Schedule E/F, copy the following:				
	9a. Do	omestic support obligations (Copy line 6a.)	\$	2,159.00		
	9b. Ta	axes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00		
	9c. CI	laims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00		
	9d. St	tudent loans. (Copy line 6f.)	\$	0.00		

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

d 07/27/1	7		Case 17-12875	D
Fill in this in	formation to ide	entify your case and this	filing:	
Debtor 1	ARMANDO E	E. ZAVALA		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Eastern District of Ca	alifornia	
Case number				☐ Check if this is a
				amended filing
Official	Form 106	SA/B		
Sche	dule A/	B: Property	<b>y</b>	12/15
category w responsible write your r	here you think it e for supplying on the and case it	tifts best. Be as complet correct information. If mo number (if known). Answ	te and accurate as possible. If two marrie ore space is needed, attach a separate sh	in more than one category, list the asset in the ed people are filing together, both are equally eet to this form. On the top of any additional page on or Have an Interest In
1. Do you o	wn or have any	legal or equitable interes	et in any residence, building, land, or sim	ilar property?
	io to Part 2.	<b>5,</b>	, <u> </u>	
	Where is the prop	perty?		
		•	What is the property? Check all that apply	Do not deduct secured claims or exemptions. Pu

☐ Single-family home

ZIP Code

ZIP Code

State

Street address, if available, or other description

If you own or have more than one, list here:

Street address, if available, or other description

Duplex or multi-unit building

Condominium or cooperative

■ Manufactured or mobile home

Land	\$	\$		
☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of your ownersh interest (such as fee simple, tenancy the entireties, or a life estate), if know			
Who has an interest in the property? Check one.	• • • • • • • • • • • • • • • • • • •	,		
Debtor 1 only				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is community property (see instructions)			
Other information you wish to add about this it property identification number:				
What is the property? Check all that apply.	Do not deduct secured cla			
Single-family home	the amount of any secured claims on Schedule L Creditors Who Have Claims Secured by Property			
Duplex or multi-unit building	orcanors vino riave oran.	no occured by 1 roperty.		
Condominium or cooperative	Current value of the			
Manufactured or mobile home	entire property?	portion you own?		
Land	\$	\$		
Investment property	Describe the nature of	of your ownership		
Timeshare	interest (such as fee			
U Other	the entireties, or a life	e estate), if known.		
Who has an interest in the property? Check one.				
Debtor 1 only				
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Check if this is community property			
At least one of the debtors and another	(see instructions)	• • • •		
Other information you wish to add about this ite property identification number:	m, such as local			

the amount of any secured claims on Schedule D:

Creditors Who Have Claims Secured by Property.

entire property?

Current value of the Current value of the

portion you own?

City

County

City

County

1.2.

Filed 07/27/1	7 ARMANDO	Ε.	ZAVAL	A
Debtor 1	ARMANDO	ᆫ.	ZAVAL	ρ

Case 17-12875

Last Name

Doc 1

Case number (if known)\_\_\_

1.3.	Street address, if available	s, or other description  State ZIP Code	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property?  \$  Describe the nature of interest (such as fee the entireties, or a life.)	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
	County		□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another  Other information you wish to add about this ite property identification number:		mmunity property
2. Add you	the dollar value of the phave attached for Part	portion you own for a 1. Write that number I	II of your entries from Part 1, including any entries	s for pages	\$0.00
you owr	n that someone else drive s, vans, trucks, tractors No	s. If you lease a vehicl	st in any vehicles, whether they are registered or in e, also report it on Schedule G: Executory Contracts and the state of the state o		s
3.1.	Model: Year: Approximate mileage:	DODGE CHARGER 2014	Who has an interest in the property? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	Other information:		☐ Check if this is community property (see instructions)	\$13,000.00	\$ 13,000.00
If yo	u own or have more than				
3.2.	Make: Model: Year: Approximate mileage:	NINJA 2007	Who has an interest in the property? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	Other information:	RRENDER	☐ Check if this is community property (see instructions)	\$6,000.00	\$ 6,000.00

Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 3.3. the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **1** No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 41 the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another portion you own? entire property? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 19,000.00 you have attached for Part 2. Write that number here

Case number (if known)

Last N

Part 3:	Describe	Your	Personal	and	Household	Items
				-		

Do you own or have any legal or equitable	interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6. Household goods and furnishings  Examples: Major appliances, furniture, line	ens, china, kitchenware	
☐ No ☐ Yes. Describe ALL CUSTO!	MARY HOUSEHOLD GOODS & FURNISHINGS	\$3,000.00
7. Electronics  Examples: Televisions and radios; audio, collections; electronic devices	video, stereo, and digital equipment; computers, printers, scanners; mus including cell phones, cameras, media players, games	sic
☐ No ☐ Yes. Describe 2 TV'S		\$150.00
8. Collectibles of value  Examples: Antiques and figurines; paintin	igs, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles	consumeration & consumeration of the consumeration
☐ Yes. Describe		\$
9. Equipment for sports and hobbies	e, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cand	pes
☑ No ☐ Yes. Describe		\$
10. Firearms  Examples: Pistols, rifles, shotguns, ammu  No	unition, and related equipment	
Yes. Describe		\$
11. Clothes  Examples: Everyday clothes, furs, leather  No	r coats, designer wear, shoes, accessories	
☑ Yes. Describe PERSONAL	CLOTHING & SUPPLIES	\$\$
12. <b>Jewelry</b> Examples: Everyday jewelry, costume jewelry	welry, engagement rings, wedding rings, heirloom jewelry, watches, gem	s,
No WEDDING F	RINGS & MISCELLANEOUS JEWELRY	\$
13. Non-farm animals  Examples: Dogs, cats, birds, horses		
☑ No ☐ Yes. Describe		\$
14. Any other personal and household iter	ms you did not already list, including any health aids you did not lis	t
No Yes. Give specific		\$
7 A 2-2000 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1-300 - 1	ies from Part 3, including any entries for pages you have attached	\$ 3,650.00
		• 5,000.00

Case number (if known)

Part 4: Describe Your Financial Assets

Oo you own or have any	legal or equitable interest in a	nny of the following?		Current value of portion you own Do not deduct secur or exemptions.	1?
6. <b>Cash</b> <i>Examples</i> : Money you	have in your wallet, in your hom	e, in a safe deposit box, and on hand when you file	your petition		
☑ No					
☐ Yes			ash:	\$	
7. Deposits of money Examples: Checking, and other s	savings, or other financial accou similar institutions. If you have m	nts; certificates of deposit; shares in credit unions, lultiple accounts with the same institution, list each.	orokerage houses,		
No Ves		Institution name.			
Yes		Institution name:			
	17.1. Checking account:	WELLS FARGO		\$	10.00
	17.2. Checking account:	BANK OF AMERICA		\$	50.00
	17.3. Savings account:	BANK OF AMERICA		\$	8.00
	17.4. Savings account:			\$	
	17.5. Certificates of deposit:		·	\$	
	17.6. Other financial account:			\$	
	17.7. Other financial account:			φ	
				<b>3</b>	
	17.8. Other financial account:			\$	
	17.9. Other financial account:			\$	
18. Bonds, mutual funds	, or publicly traded stocks				
	, investment accounts with brok	erage firms, money market accounts			
<b>☑</b> No ☐ Yes	Institution or issuer name:				
				\$	
				- \$ \$	
				-	
				<u> </u>	
		rated and unincorporated businesses including	g an interest in		
19. Non-publicly traded an LLC, partnership,	stock and interests in incorpo , and joint venture	rated and unmoorporated businesses, including			
			% of ownership:		
an LLC, partnership, ☑ No ☑ Yes. Give specific	and joint venture  Name of entity:		0%%	\$	
an LLC, partnership,   No	, and joint venture  Name of entity:		∩0/_	\$ \$	

Case	number	(if known)
------	--------	------------

Yes. Give specific information about them	with employer	ssssssss
1. Retirement or pension accounts  Examples: Interests in IRA, ERISA, Kee  No  Yes. List each account separately. Type of accou  401(k) or simila  Pension plan: IRA: Retirement acc Keogh:	ogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plar  nt: Institution name:  or plan: WITH EMPLOYER	\$s - \$s _ \$ss
Examples: Interests in IRA, ERISA, Ked  No  Yes. List each account separately. Type of accound 401(k) or similar Pension plan: IRA: Retirement accound Keogh:	ogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plar  nt: Institution name:  or plan: WITH EMPLOYER	s
Examples: Interests in IRA, ERISA, Ked  No  Yes. List each account separately. Type of accound 401(k) or similar Pension plan: IRA: Retirement accound Keogh:	ogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plannt: Institution name:  WITH EMPLOYER	\$\$\$\$
Examples: Interests in IRA, ERISA, Ked  No  Yes. List each account separately. Type of accound 401(k) or similar Pension plan: IRA: Retirement accound Keogh:	nt: Institution name:  ar plan: WITH EMPLOYER	\$ <u>2,500.00</u> \$_
Yes. List each account separately. Type of account 401(k) or similar Pension plan:  IRA:  Retirement account Keogh:	with employer	\$
account separately. Type of accou  401(k) or simila  Pension plan:  IRA:  Retirement acc  Keogh:	with employer	\$
401(k) or simila Pension plan: IRA: Retirement acc Keogh:	, pai.	\$
Pension plan: IRA: Retirement acc Keogh:		\$ - \$
IRA: Retirement acc Keogh:		- - \$
Retirement acc Keogh:		_ \$
Keogh:	ount:	
-		\$
Additional acco		_ \$
	ount:	\$
Additional acco	ount:	
companies, or others  No	prepaid rent, public utilities (electric, gas, water), telecommunications	
☐ Yes	Institution name or individual:	
Electric:		- \$ <u> </u>
Gas: Heating oil:		- \$
	iit on rental unit:	- \$
Prepaid rent:	in Ond Sinc	· \$
Telephone:		· \$
Water:		- D
Rented furnitur	re:	- \$
Other:		- \$
		- \$
23. <b>Annuities</b> (A contract for a periodic page	yment of money to you, either for life or for a number of years)	
☑ No		
KA No	and description:	
		\$

Case number (if known)

24. Interests in an education IRA, in an account in a qualified ABLE program, or unde	er a qualified state tuition program.	
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).		
☑ No		
Yes Institution name and description. Separately file the rec	ords of any interests.11 U.S.C. § 521(c	<b>)</b> :
		•
		\$
		\$
		\$
25. Trusts, equitable or future interests in property (other than anything listed in line exercisable for your benefit	1), and rights or powers	
<b>☑</b> No	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	nooy
☐ Yes. Give specific		#1.
information about them		\$
CONTRACTOR OF CO		
26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agi	reements	
No		
grandely by a special and a second se		***************************************
Yes. Give specific information about them		\$
- 12 A Marian Continued State	white-the state of the state of	
27. Licenses, franchises, and other general intangibles		
Examples: Building permits, exclusive licenses, cooperative association holdings, liquo	or licenses, professional licenses	
☑ No		
Yes. Give specific		
information about them		\$
Money or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☑ No		
Yes. Give specific information	Fodosoli	¢
about them, including whether	Federal:	<b>D</b>
you already filed the returns and the tax years	State:	\$
and the tax years.	Local:	\$
Висопродукти по подраждения подраждения на постоя общений в постоя постоя общений в подраждения постоя общений в постоя обще	er	
29. Family support		
Examples: Past due or lump sum alimony, spousal support, child support, maintenance	e, divorce settlement, property settleme	ent
<b>☑</b> No		
☐ Yes. Give specific information		
·	Alimony:	\$
	Maintenance:	\$
	Support:	\$
	Divorce settlement:	\$
	Property settlement:	\$
30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay,	vacation nav. workers' compensation	
Social Security benefits, unpaid loans you made to someone else	vacation pay, workers compensation,	
☑ No	and the second s	arr y
☐ Yes. Give specific information		•
		\$

Case	number	(if known)
Case	Hullibel	(IF KNOWN)

	s en	=		
31.	Interests in insurance policies	;		
	Examples: Health, disability, or I	ife insurance; health savings account (HSA	A); credit, homeowner's, or renter's insurance	
	☑ No			
	Yes. Name the insurance co of each policy and list it		Beneficiary:	Surrender or refund value:
				\$
		<u> </u>		 
				\$
				<del></del> -
32.		s due you from someone who has died ing trust, expect proceeds from a life insura died.	ance policy, or are currently entitled to receive	
	☑ No			
	☐ Yes. Give specific information			
		Companies as a second as a	The state of the s	\$
33.	- · · · · · · · · · · · · · · · · · · ·	whether or not you have filed a lawsuit o ent disputes, insurance claims, or rights to		
	Yes. Describe each claim			· ·
				\$
34.	to set off claims	ated claims of every nature, including c	ounterclaims of the debtor and rights	
	No Describe and taken		The second secon	no, on offered manufacturing
	Yes. Describe each claim	1		\$
		Topics come of a comment of the comm	N. N. C. A. C.	
35.	Any financial assets you did n	-		
	☑ No			years were an account of the second of the s
	Yes. Give specific information			\$
		Agricultura contrator and enterpression and a second contrator contrator and contrator of the contrator of t	payee data. Agai yen ee garagaadaa dadaa kana kana kanadaan ka ka kagaya ny uu kanyamaa kanadaan ka ka ka ka k	
36		our entries from Part 4, including any e	entries for pages you have attached	\$ 2,568.00
	1011 are 4. Write that hamber i			<u> </u>
	× .			
Pä	Describe Any Bu	siness-Related Property You O	)wn or Have an Interest In. List an	y real estate in Part 1.
	D		John Honor Company	<del></del>
3/	• •	or equitable interest in any business-re	eated property?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the
				portion you own?  Do not deduct secured claims
				or exemptions.
38	Accounts receivable or comm	issions vou already earned		
	□ No			
	☐ Yes. Describe	The second state of the se	, the state of the	Andrew of the company
	Tes. Describe			\$
30	Office equipment, furnishings	s. and supplies	and an immediate at 1, 1, 1, 2, and an immediate and a state of the st	v
ψĐ	• • • • •	• • • •	chines, rugs, telephones, desks, chairs, electronic dev	ices
	□ No			
	☐ Yes. Describe			•
				Y

Debtor 1 ARMANDO E. ZAVALA Case nu	umber (if known)	DOC
First Name Middle Name Last Name		
40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade		
□ No	1 prominental designation of the state of the second section of the section of the second section of the section	
Yes. Describe		\$
	The state of the s	J
44 lavandam		
41. Inventory	жимин тімін табайні (1814—1814—1814—1814—1814—1814—1814—1814	
Yes. Describe		\$
Tes, Describe	anner engagemennen gegen terreter i type en terreter anner terrete	
42. Interests in partnerships or joint ventures		
□ No		
Yes. Describe Name of entity:	% of ownership:	
	%	\$
		\$
	<del></del>	Ψ
	%	<b>D</b>
A company of the control of the cont		
43. Customer lists, mailing lists, or other compilations ☐ No		
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 1	101/414\\2	
	101(4174)7	
No	ns of summarished which and distribute. And is summarished to the "Residence of the "William of the Association of the Associat	
Yes. Describe		\$
44. Any business-related property you did not already list		
□ No		
☐ Yes. Give specific		
information		\$
		\$·
		<b>\$</b>
the state of the s		
		\$
		\$
		\$
		Y
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you	have attached	0.00
for Part 5. Write that number here	······	· · · · · · · · · · · · · · · · · · ·
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own	n or Have an Interest I	n.
If you own or have an interest in farmland, list it in Part 1.		
	······································	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-rela	ted property?	
No. Go to Part 7.		
Yes. Go to line 47.		
		Current value of the
		portion you own?
		Do not deduct secured claims
		or exemptions.
47. Farm animals		
Examples: Livestock, poultry, farm-raised fish		
☐ No		
Yes		

48. Crops—either growing or harvested  No				was a second of the second of		
☐ Yes. Give specific	The state of the s					
information			adan irradiadak an goror ere esandardan i idalik kulupan (katalanda distantu Joseph Santana).	***************************************	\$	
49. Farm and fishing equipment, implements, machinery, fixture  No						
☐ Yes	125 MINISTER CONTRACTOR	page Aprilla special angles from the decision of differences and differences a	MI - DADA META TIL TE - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
	nadalyige and religionship restrictive				\$	
50. Farm and fishing supplies, chemicals, and feed						
☐ No ☐ Yes	agenty-section in the section in the	and the second s	tun Bahkarka ang Araba unuka samuntasan masa ang ang ang ang ang ang ang ang ang an			
					\$	
51. Any farm- and commercial fishing-related property you did n	ot already	list				
Yes. Give specific information					\$	<del></del> .
52. Add the dollar value of all of your entries from Part 6, includ for Part 6. Write that number here	ing any en	tries for pages	you have attached	→	\$	0.00
Control of the Contro						
Part 7: Describe All Property You Own or Have	an Inter	est in That \	ou Did Not List A	bove		:
53. Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?					:
☑ No	······································		AN THE STREET, A SECURITY OF THE STREET,	***************************************	\$	
Yes. Give specific information				100	\$	
					\$	
				_	•	0.00
54. Add the dollar value of all of your entries from Part 7. Write to	that numbe	er nere		<del>7</del> `		
en e			•			
Part 8: List the Totals of Each Part of this Form	1					
55. Part 1: Total real estate, line 2				<b>&gt;</b>	\$	0.00
56. Part 2: Total vehicles, line 5	\$	19,000.00				
57. Part 3: Total personal and household items, line 15	\$	3,650.00				
58. Part 4: Total financial assets, line 36	\$	2,568.00				
59. Part 5: Total business-related property, line 45	\$	0.00				
60 Part 6: Total farm- and fishing-related property, line 52	\$	0.00				
		0.00				
61. Part 7: Total other property not listed, line 54	T \$					05.040.00
62. Total personal property. Add lines 56 through 61	\$	25,218.00	Copy personal property	total 👈	<b>+</b> \$	25,218.00
						25 240 00
63. Total of all property on Schedule A/B. Add line 55 + line 62					\$	25,218.00

			Case 17-12875	Do
Fill in this in	formation to ide	entify your case:		,
Debtor 1	ARMANDO E	. ZAVALA		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Eastern District of C	alifornia	
Case number (If known)				☐ Check if this is an amended filing
Schod	lula C: '	_ The Drene	rty You Claim	as Evampt
SCIICU	uie o.	ine riope	ty Tou Claim	as Exempt 04/16
Be as complete Using the prop space is neede	e and accurate a erty you listed or	s possible. If two married a Schedule A/B: Property ach to this page as many	people are filing together, both are (Official Form 106A/B) as your so	e equally responsible for supplying correct information.  arce, list the property that you claim as exempt. If more as necessary. On the top of any additional pages, write

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☑ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

	otion of the property and line on B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: Line from Schedule A/I	FURNITURE  6.	\$ <u>3,000.00</u>	■ 3,000.00 ■ 100% of fair market value, up to any applicable statutory limit	CCP 703.140(b)(3)
Brief description: Line from Schedule A/	ELECTRONICS 7	\$ <u>150.00</u>	\$\frac{150.00}{100\% of fair market value, up to any applicable statutory limit	CCP 703.140(b)(3)
Brief description: Line from Schedule A/	CLOTHING  3: 11	\$ 300.00	\$ 300.00  100% of fair market value, up to any applicable statutory limit	CCP 703.140(b)(3)
(Subject to a ✓ No		years after that for case	es filed on or after the date of adjustment.  1,215 days before you filed this case?	)

Case 17-12875

Doc 1

ARMANDO E. ZAVALA

\*\*Idda Name Last Name Debtor 1

First Name Middle Name

Case number (if known)\_

#### **Additional Page** Part 2:

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description: Line from	JEWELRY 12.	\$ 200.00	<b>2</b> \$ 200.00	CCP 703.140(b)(4)	
Schedule A/B: Brief		40.00	any applicable statutory limit	CCP 703.140(b)(1)	
description: Line from Schedule A/B:	CHECKING WELLS  17.1	\$10.00_	■ 10.00 ■ 100% of fair market value, up to any applicable statutory limit		
Brief description:	CHECKING B OF A	\$50.00	<b>✓</b> \$ 50.00	CCP 703.140(b)(1)	
Line from Schedule A/B:	17.2		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	SAVINGS B OF A	\$8.00	<b>₫</b> \$8.00	CCP 703.140(b)(1)	
Line from Schedule A/B:	17.3		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	RETIREMENT EMP	\$2,500.00	<b>✓</b> \$ 2,500.00	703.140(b)(10)(E)	
Line from Schedule A/B:	21		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	<b></b>		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	<b></b>		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	□ \$ □ 100% of fair market value, up to		
Line from Schedule A/B:			any applicable statutory limit		
Brief description:		\$	\$\$ 100% of fair market value, up to		
Line from Schedule A/B:			any applicable statutory limit		
Brief description:		\$	□ \$ □ 100% of fair market value, up to		
Line from Schedule A/B:		***	any applicable statutory limit		
Brief description:		\$	□ \$ □ 100% of fair market value, up to		
Line from Schedule A/B:			any applicable statutory limit		
Brief description:		\$	□ \$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		

information to ide	ntify your case:			
ARMANDO E. ZAVALA				
First Name	Middle Name	Last Name		
Si-11-	Middle Nome	Last Nama		
g) First Name	widdle Name	Last Name		
s Bankruptcy Court for	rthe: Eastern District of C	alifornia		
er				
	ARMANDO E First Name	First Name Middle Name  9) First Name Middle Name  s Bankruptcy Court for the: Eastern District of C	ARMANDO E. ZAVALA  First Name Middle Name Last Name  9) First Name Middle Name Last Name s Bankruptcy Court for the: Eastern District of California	

☐ Check if this is an amended filing

## Official Form 106D

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

Part 11 List All Secured Claims

Tare in Cooding Claims				
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 CALIF REP/MECHANICS BAN	Describe the property that secures the claim:	\$21,217.00	\$ 13,000.00	8,217.00
Creditor's Name POST OFFICE BOX 25805 Number Street	2014 DODGE CHARGER			
SANTA ANA CA 92799 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	<ul> <li>✓ An agreement you made (such as mortgage or secured car loan)</li> <li>☐ Statutory lien (such as tax lien, mechanic's lien)</li> <li>☐ Judgment lien from a lawsuit</li> <li>☐ Other (including a right to offset)</li> </ul>			
☐ Check if this claim relates to a community debt	Other (moduling a right to onset)	_		
Date debt was incurred	Last 4 digits of account number			
CAPITAL ONE/KAWASAKI	Describe the property that secures the claim:	\$12,089.00	s <u>6,000.00</u> s	6,089.00
Creditor's Name POST OFFICE BOX 30253 Number Street	2007 KAWASAKI NINJA MOTORCYCLE			
;	As of the date you file, the claim is: Check all that apply.	٠.		
SALT LAKE CITY UT 84130	☐ Contingent ☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	_		
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in	Column A on this page. Write that number here:	\$ 33,306.00		
·				

٨		1 A	NID	$\sim$ 1	F. Z	7Δ\	/Δ	IΔ
~	-	/I/N	IVI	,, , ,		-	_	ᆫᄼ

		_		
Fire	+ h	Jam		Middl

l ast Nam

Case number (if known)\_\_\_\_\_

Additional Page  After listing any entries on this p by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Column B.  Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	·	The state of the s		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		7		
Number Street	As of the date you file, the claim is: Check all that apply			
City State ZIP Code	Contingent  Unliquidated  Disputed			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	_		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	_ \$
Creditor's Name		7		
Number Street  City State ZIP Code	<ul> <li>As of the date you file, the claim is: Check all that apply</li> <li>Contingent</li> <li>Unliquidated</li> <li>Disputed</li> </ul>			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	<ul> <li>An agreement you made (such as mortgage or secured car loan)</li> <li>Statutory lien (such as tax lien, mechanic's lien)</li> <li>Judgment lien from a lawsuit</li> <li>Other (including a right to offset)</li> </ul>	_		
Date debt was incurred	Last 4 digits of account number	,	***************************************	
Add the dollar value of your entri	es in Column A on this page. Write that number here	: 5 0.0	0	
If this is the last page of your form	n, add the dollar value totals from all pages.	\$ 33,306.0	0	· · · · · · · · · · · · · · · · · · ·

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection

Debtor 1

ARMANDO E. ZAVALA

First Name	Middle Name

Last Name

Case number (if known)\_\_\_\_\_

Part 2:	List Others to Be Notified for a Debt That You Already L	isted

agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? \_ Last 4 digits of account number \_\_\_\_ \_ Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_ Last 4 digits of account number \_\_\_\_ Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_ Last 4 digits of account number \_\_\_\_ \_\_ \_\_ Name Number Street City ZIP Code State On which line in Part 1 did you enter the creditor? \_\_ Name Last 4 digits of account number \_\_\_\_ \_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_ Last 4 digits of account number \_\_\_\_ \_ Name Number Street City ZIP Code On which line in Part 1 did you enter the creditor? \_ Name Last 4 digits of account number \_\_\_\_ \_ Number Street ZIP Code City State

a 0 <u>772771</u> 7			Case 17-128/5	L
Fill in this in	formation to ide	ntify your case:		
Debtor 1	ARMANDO E	. ZAVALA		
Debio: 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	r the: Eastern District of C	alifornia	☐ Check if this is a
Case number				amended filing

## Official Form 106E/F

# Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecure	ed Claims			
nonpriority amounts. As much as possible, list the c		at claim here an ame. If you have	id show both f e more than tv	oriority and o priority
(For an explanation of each type of claim, see the ir		Total claim	Priority amount	Nonpriority amount
SAN LUIS OBISPO CO FAMILY SPT Priority Creditor's Name 1120 MILL ST.	Last 4 digits of account number	\$ 2,159.00	\$ 2,159.00	) \$
Number Street  SAN LUIS OBISPO CA 93408	As of the date you file, the claim is: Check all that apply	<i>i</i> .		
City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only	<ul><li>✓ Unliquidated</li><li>☐ Disputed</li></ul>			
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government			
Is the claim subject to offset?	<ul> <li>□ Claims for death or personal injury while you were intoxicated</li> <li>□ Other. Specify</li></ul>	_	Programme and the second secon	N. Thomas or a residence of the second of th
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	As of the date you file, the claim is: Check all that appl Contingent	y.		
City State ZIP Code  Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify	<del></del>	ده است ب سید سو	#AA. A #

isting any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
	Last 4 digits of account number	\$	\$	\$
riority Creditor's Name	When was the debt incurred?			
lumber Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
ity State ZIP Code	☐ Unliquidated ☐ Disputed			
Vho incurred the debt? Check one.	- Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you were intoxicated			
Check if this claim is for a community debt	Other. Specify			
s the claim subject to offset?				
□ No				
Yes		entine on minimal applications that is a consistent	nego es zamennese com <del>escretario</del>	ke kineralisinin minin energy minin e
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name		•		
Number Street	When was the debt incurred?			
value out out	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only				
Debtor 1 and Debtor 2 only	<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
	Other. Specify			
ls the claim subject to offset?				
☑ No ☑ Yes				
School several management of a strain and analysis on operation and several sections in the section of the sect	CONTROL OF THE PROPERTY OF THE		The state of the s	Marrie and a first feet
Priority Creditor's Name	Last 4 digits of account number	\$	. \$	\$
Filolity Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	□ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
_	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>	1 Tr	programme will interchange the common and the	**************************************
☐ Check if this claim is for a community debt	Other. Specify	. ,		
Is the claim subject to offset?				
□ No				

	ı	.ast	N

Par	t 2: List All of Your NONPRIOR	ITY Unse	cured Claims						
3. 1	Do any creditors have nonpriority uns								
	<ul> <li>No. You have nothing to report in this part. Submit this form to the court with your other schedules.</li> <li>✓ Yes</li> </ul>								
4. L	_ist all of your nonpriority unsecured	itor separat itor holds a	tely for each claim	order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no	list claim	s already			
	ciains in out the continuation rage or r	art Z.			Total o	laim			
4.1	ABSOLUTE PROFESSIONAL	TOOLS	the same of the sa	Last 4 digits of account number	\$	300.00			
	Nonpriority Creditor's Name 8323 13TH AVE.			When was the debt incurred?					
	Number Street								
	HANFORD City	CA State	93230 ZIP Code	As of the date you file, the claim is: Check all that apply.					
	Who incurred the debt? Check one.  Debtor 1 only			☐ Contingent ☑ Unliquidated ☐ Disputed					
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another			☐ Student loans					
	☐ Check if this claim is for a commun	nity debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>					
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts					
	☐ No ☐ Yes			other. Specify LOAN					
						161.00			
4.2	BANK OF THE SIERRA/AMER	RICAN PI	ROFIT RECO	Last 4 digits of account number	\$	101.00			
	34505 W 12 MILE RD., #333								
	Number Street	N / I	48331	As of the date you file, the claim is: Check all that apply.					
	FARMINGTON HILLS	MI State	ZIP Code	- Contingent					
	Who incurred the debt? Check one.			Unliquidated					
	Debtor 1 only			☐ Disputed					
	Debtor 2 only			Type of NONPRIORITY unsecured claim:					
	Debtor 1 and Debtor 2 only			Student loans					
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce					
	Check if this claim is for a commu	nity debt		that you did not report as priority claims					
A CANADA AND A CAN	Is the claim subject to offset? ☐ No ☐ Yes			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify BANK FEES/COLLECTIONS	•				
4.3	CASH CENTRAL	MARCO SEES SEES SEES SEES SEES SEES SEES SE	nd on a chilled to the contract of the contrac	Last 4 digits of account number		255.00			
)	Nonpriority Creditor's Name			When was the debt incurred?	\$	200.00			
	6785 BOBCAT WAY, #200 Number Street								
!	DUBLIN	ОН	43016	As of the date you file, the claim is: Check all that apply.					
) at the	City	State	ZIP Code	☐ Contingent					
ř.	Who incurred the debt? Check one.			☑ Unliquidated					
5	Debtor 1 only			Disputed					
	Debtor 2 only Debtor 1 and Debtor 2 only			Time of NONDBIODITY improving a fairni					
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:					
,	☐ Check if this claim is for a commu	ınity debt		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce</li></ul>					
	Is the claim subject to offset?			that you did not report as priority claims					
# 7 M P P P P P P P P P P P P P P P P P P	□ No			<ul> <li>□ Debts to pension or profit-sharing plans, and other similar debt</li> <li>□ Other. Specify LOAN</li> </ul>					
ŧ	☐ Yes								

Your NONPRIORITY Unsecured Claims — Continu	uation	Page
---------------------------------------------	--------	------

listing any entries on this pag	e, number them	i beginning With 4.4	4, followed by 4.5, and so forth.	Total clair
DON ROBERTO JEWELE	RS		Last 4 digits of account number	\$ <u>1,630</u> .
Nonpriority Creditor's Name 205 AVENIDA FABRICAN	ITE		When was the debt incurred?	
Number Street		00070	As of the date you file, the claim is: Check all that apply.	
SAN CLEMENTE	CA State	92672 ZIP Code	☐ Contingent	
Jily	0.0.0		✓ Unliquidated	
Who incurred the debt? Check or	ie.		☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			✓ Other. Specify CREDIT CARD	
□ No				
Yes			The second secon	
DITRONICS FINANCIAL	ACCOUNT F	RCVY SERVIC	Last 4 digits of account number	\$ <u>229</u>
Nonpriority Creditor's Name	A00001111	TOVI OLIVIO	When was the debt incurred?	
POST OFFICE BOX 764	8			
Number Street GOODYEAR	ΑZ	85338	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent	
			☑ Unliquidated	
Who incurred the debt? Check o	ne.		Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and a	another		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a c	ommunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	•		Other. Specify LOAN/COLLECTIONS	
□ No				
Yes				
er der en	A TATE OF THE PROPERTY OF THE			<sub>\$151</sub>
FAMILY HEALTHCARE	NETWORK/F	RASH CURTIS	Last 4 digits of account number	
Nonpriority Creditor's Name 190 S. ORCHARD AVE.	, #A205		When was the debt incurred?	
Number Street VACAVILLE	CA	95688	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
14th - 1	ana		✓ Unliquidated	
Who incurred the debt? Check	une.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify MEDICAL COLLECTIONS	
□ No				
Yes				

our NONP	RIORITY	Unsecured	Claims -	Continuation	Page
----------	---------	-----------	----------	--------------	------

er listing any entries on this page, numb	er them l	peginning with 4.	4, тоноwed by 4.5, and so torth.	Total clain
SPEEDY CASH.COM 94-CA/AD	ASTR/	RECOVER	Last 4 digits of account number	\$ 268.0
Nonpriority Creditor's Name 7330 W. 33RD ST. N, #118			When was the debt incurred?	
Number Street	 (S	67205	As of the date you file, the claim is: Check all that apply.	
WICHITA K		ZIP Code	☐ Contingent	
•			✓ Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only  Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and another			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
☐ Check if this claim is for a community	/ debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			✓ Other Specify LOAN/COLLECTIONS	
No Yes				
	, v sa ja sosanninga aksoo justavarigisva v sagaran og menerold v	n, norman umpressen ett säälle kannatat och mit elle 1800	Last 4 digits of account number	s 1,354.
TRUE ACCORD  Nonpriority Creditor's Name			Last 4 digits of account number	ψ <u>1,00 i.</u>
303 2ND ST., #750 750 SOUT	H TOW	/ER	When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.	
0,	CA ate	94107 ZIP Code	☐ Contingent	
City	aic	2.11 0000	✓ Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
✓ Debtor 1 only ☐ Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
☐ At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a communit	y debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify LOAN	
□ No				
☐ Yes				
NATOT COACT CACULLE CEAE	·····		Last 4 digits of account number	<sub>\$</sub> 315
WEST COAST CASH/HP SEAR Nonpriority Creditor's Name	(3			
2000 18TH ST.			When was the debt incurred?	
Number Street BAKERSFIELD	CA	93301	As of the date you file, the claim is: Check all that apply.	
	tate	ZIP Code	☐ Contingent	
Who incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and another			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Check if this claim is for a communit	ty debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify	
□ No				
☐ Yes			•	

Filed 07/27/17/RMANDO E. ZAVALA
First Name Middle Name

List Others to Be Notified About a Debt That You Already Listed

SAN LUIS OBISPO CO	FAMILY S	UPPORT_	On which entry in Part 1 or Part 2 did you list the original creditor?				
1200 MONTEREY ST.			Line 2.1 of (Check one):   ✓ Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claim				
			Last 4 digits of account number				
SAN LUIS OBISPO	CA	93401	<u> </u>				
Sity	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?				
lame							
			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured				
			Claims				
City	State	ZIP Code	Last 4 digits of account number				
Market Services	STEEN SEEDING		On which entry in Part 1 or Part 2 did you list the original creditor?				
lame			·				
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number				
City The Period of the Period	State	ZIP Code	$\chi_{(i,j)}(x) = (x_i, x_i) + ($				
Name			On which entry in Part 1 or Part 2 did you list the original creditor?				
•			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims				
Number Street	1.020		☐ Part 2: Creditors with Nonpriority Unsecured Claims				
City	State	ZIP Code	Last 4 digits of account number				
and the same property of the second s	years of the total	kijaki in morambumana b	On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured				
Number Street			Claims				
			Last 4 digits of account number				
City	State	ZIP Code					
Name			On which entry in Part 1 or Part 2 did you list the original creditor?				
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
and the second s							
City	State	ZIP Code	Last 4 digits of account number				
			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name							
Number Street		···	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
			Part 2: Creditors with Nonpriority Unsecured Claims				
1,3-10-1			Last 4 digits of account number				
City	State	ZIP Code	Last 7 digits of account fidinger				

Part 4:

## Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

## Total claim

## Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

#### 2,159.00 6a

- 0.00 6b.
- 0.00 6c.
- 0.00
- 2.159.00

## **Total claim**

## **Total claims** from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- 6f. 0.00
- 0.00 6g
- 0.00 6h
- 4,663.00
- 6j. 6,822.00

Fill i	n this in	ıformati	on to ide	ntify your	case:											
Debto	or			. ZAVAL					_							
Debto	or 2	First Nam	e	M	liddle Name	1	ast Name		_							
(Spou	se If filing)				liddle Name		ast Name									
Unite	d States	Bankrupt	tcy Court fo	r the: Easte	ern District of	California										
Case (If kn	number own)														Check if this amended fili	
Offi	cial l	Form	1060	3												
Sc	hed	ule	G: E>	 cecut	tory Co	ontra	cts ar	d U	Jnex	cpire	d Le	ase	S		12/	15
inforr additi	nation. ional pa	If more iges, wi	space is rite your r	needed, o name and	ole. If two ma copy the addi case numbe acts or unexp	itional pag r (if know	ge, fill it out n).	togeti numb	her, bot er the e	h are equ ntries, ar	ually resp nd attach	onsible it to th	e for sup is page.	oplying On the	correct top of any	
	<b>⊿</b> No. (	Check th	nis box an	d file this f	orm with the o	court with y	our other so	hedule are list	s. You h ted on S	nave nothi Schedule /	ng else to 4/B: <i>Prop</i>	report erty (Of	on this fo	orm. m 106/	VB).	
(	ist sep example unexpire	e, rent, '	vehicle le	son or cor ase, cell p	npany with v ohone). See t	vhom you he instruct	have the co	ontract form in	or leas the inst	e. Then s ruction bo	tate wha	t each	contract amples	or lea	se is for (for utory contract	ts and
I	Person	or com	pany with	ı whom yo	ou have the c	ontract o	r lease		Si	tate what	the con	ract or	lease is	for		
2.1																
	Name				· · · · · · · · · · · · · · · · · · ·											
:	Number	Str	eet			•										
	-21.			01-1	ziP Code											
<b></b>	City	**************************************	· 0	State	e ZIP Coue	4000) W	#rear-	* <del></del>	\$1. Co v # }**********************************	Ad year "			Talan - MENGANO AND A	and the same of th	magiglish prodiction of 1001 (100 )	,у
2.2	Nama															
	Name															
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	City			State	e ZIP Code	paper graph to the control of the co			- AND MARKETON	no establication de la companie de l	unusususus and a graduation	allowed by the	···· Allegan (Spirit Association)	y pogra vocanie z PROLPRO		pr. jumpje mleik
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	Name															
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2.4	Name															
	. 101110															
	Number	Sti	reet													
2.5	City		No. 26.	Stat	e ZIP Code	9	s				29.7666	46 AN -C -			jellege i zi e hegge e Zidli	
,	Name															
der work art ha	Number	, 64	reet													
	HULLIDE	ا ب														

City

State

ZIP Code

ARMANDO E. ZAVALA

First Name Middle Name

-	oct	Ma	me	

Case number (if known)	



## Additional Page if You Have More Contracts or Leases

	erson or	company with v	whom you h	nave the contract or lease	What the contract or lease is for
22					
Ī	Name				<del></del>
ī	Number	Street	<u> </u>		
i	City		State	ZIP Code	
2	· · · · -	*** August Propinsion (*** ) 1220 control	e to compressión accument de l'accesso de l'accesso de la la compressión de la compressión de la compressión de	. Propaga and account well with Affire annual factor as a second and a	
	Name				<del> </del>
	Number	Street			
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	Name				
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	Name				
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	City		State	ZIP Code	
2	dentes of the second	<ul> <li>************************************</li></ul>	ANTIPA, AND PROPERTY SERVICE PROPERTY.	- no the name of the second of	
T. 73	Name				
	Number	Street			
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2	S STORESTON A	Anna work deposition y washing a seen that heretained we see	THE PARTY OF THE P	Constitution of the Consti	
en - rand	Name				
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2	1 vir., seconder - 1986	n my myddian reggr	ra sa iwi ≗u		
!	Name				
	Number	Street			
,	City	* married	State	ZIP Code	

			_
Fill in	this information to identify your case:		
Debto	ARMANDO E. ZAVALA		
	First Name Middle Name	Last Name	
Debto (Spous	e, if filing) First Name Middle Name	Last Name	
United	States Bankruptcy Court for the: Eastern District of Califo	ornia	
Case	number		
(If kno			☐ Check if this is an amended filing
			amended ming
Offic	cial Form 106H		
Sch	nedule H: Your Codebtors	<u> </u>	12/15
are fili and nu	ng together, both are equally responsible for SUDD	olving correct information	Be as complete and accurate as possible. If two married people . If more space is needed, copy the Additional Page, fill it out, s page. On the top of any Additional Pages, write your name and
1. D	o you have any codebtors? (If you are filing a joint c	ase, do not list either spous	se as a codebtor.)
: -	No		;
	1 Yes	it.	Community property states and territories include
2. V	/ithin the last 8 years, nave you lived in a commun rizona, California, Idaho, Louisiana, Nevada, New Me	exico, Puerto Rico, Texas, V	ory? (Community property states and territories include  Nashington, and Wisconsin.)
	No. Go to line 3.		
: 5	$m{4}$ Yes. Did your spouse, former spouse, or legal equiv	valent live with you at the ti	me?
	□ No	CALIEODNIA	EW. the constant address of the transport
	Yes. In which community state or territory did yo	ou live CALIFORNIA	Fill in the name and current address of that person.
:	MELISSA GARCIA (CURRENT SPO	USE)	
	Name of your spouse, former spouse, or legal equivalent		
	SAME AS DEBTOR  Number Street		<del></del>
	BRIANNA SOLIS (EX)		
•	City State	ZIP Code	
s	n Column 1, list all of your codebtors. Do not incluichown in line 2 again as a codebtor only if that persochedule D (Official Form 106D), Schedule E/F (Official Form 106D), Schedule E/F, or Schedule G to fill out Column 2.	son is a guarantor or cos	ebtor if your spouse is filing with you. List the person igner. Make sure you have listed the creditor on hedule G (Official Form 106G). Use Schedule D,
1	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
:			Check all schedules that apply:
3.1	MARIA ESCOBAR		Schedule D, line 2.1
	Name		Schedule E/F, line
;	Number Street		□ Schedule G, line
, pr con constant		70.0	
3.2	City State	ZIP Code	Security of the first state of the security of
3.2	CARLOS PEREZ Name		Schedule D, line 2.2
;	UNKNOWN		Schedule E/F, line
	Number Street		☐ Schedule G, line
	City State	ZIP Code	9
3.3	MELISSA ANN GARCIA		Schedule D, line
y	Name	<del></del>	Schedule E/F, line 4.4
;	SAME AS DEBTOR	*****	Cohodulo C lino

ZIP Code

State

ARMANDO E. ZAVALA
First Name Middle Name

Last Name

Case number	(if known)_	
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Со	olumn 1: Your codebtor			Column 2: The creditor to whom you owe the del
				Check all schedules that apply:
				☐ Schedule D, line
N	Name			☐ Schedule E/F, line
<del></del>	Number Street			☐ Schedule G, line
N	Annoel Street			
c	City	State	ZIP Code	A second
				☐ Schedule D, line
N	Name			Schedule E/F, line
_	-			☐ Schedule G, line
N	Number Street			_
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				☐ Schedule D, line
ī	Name			Schedule E/F, line
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7	City	State	ZIP Code	
	And the second s		Scholarger , Apple 1 (1) Alle Allegade remine - Scholarger (1) (1)	
ī	Name			Schedule D, line
				Schedule E/F, line
Ī	Number Street			☐ Schedule G, line
	Ou.	State	ZIP Code	
	City	State		
i	Name			Schedule D, line
				☐ Schedule E/F, line
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		01-1-	ZIP Code	
	City	State	ZIF Code	, , <u> </u>
	Name			☐ Schedule D, line
	Hame			Schedule E/F, line
	Number Street			Schedule G, line
			710 0-4	
1	City	State	ZIP Code	
	News			Schedule D, line
	Name			☐ Schedule E/F, line
	Number Street			Schedule G, line
				_
1	City	State	ZIP Code	
j				Schedule D, line
	Name			Schedule E/F, line
	Number Street			Schedule G, line
	Number Offset			

	our 0000!			
Fill in this information to identify yo	our case:			
Debtor 1 ARMANDO E. ZAV		st Name		
Debtor 2				
(Spouse, if filing) First Name		st Name		•
United States Bankruptcy Court for the: Ea	astern District of California			
Case number(If known)			Check if this  An amer	
				ement showing postpetition chapter 13
			income	as of the following date:
Official Form 106I			MM / DD	/ YYYY
Schedule I: You	r Income			12/15
Be as complete and accurate as possupplying correct information. If you fit you are separated and your spous separate sheet to this form. On the top of the part 1:  Describe Employment	u are married and not filing se is not filing with you, do top of any additional pages	g jointly, and your spouse a not include information a	is living with yo about your spous	se. If more space is needed, attach a
Fill in your employment				D. I. L. C.
information.		Debtor 1		Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☑ Employed ☐ Not employed		☐ Employed ☐ Not employed
Include part-time, seasonal, or				
self-employed work.	Occupation	DRIVER		
Occupation may include student or homemaker, if it applies.	•	OHK WESTERN MIL	LING	
	Employer's name	OTHE WEST ETAT WILL		
	Employer's address	31120 WEST ST.  Number Street		Number Street
Parameters - 1.79				
		GOSHEN CA	93227	
		City State	ZIP Code	City State ZIP Code
	How long employed there	? 2 YEARS	_	2 YEARS
Part 2: Give Details About				
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse ha				ite \$0 in the space. Include your non-filing
below. If you need more space, a	ttach a separate sheet to this	s form.		·
Page 1 and 1		***************************************	For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sal deductions). If not paid monthly,	ary, and commissions (bef calculate what the monthly	fore all payroll wage would be. 2.	3,204.82	\$
3. Estimate and list monthly over	rtime pay.	3. +	B	+ \$
4. Calculate gross income. Add li	ine 2 + line 3.	4.	\$_3,204.82	\$

ARMANDO	E.	ZAVALA	١

First Name Middle Name Last Name

Case number (	if known)		 	

			For Debtor 1	For Debtor 2 or non-filing spouse			
	Copy line 4 here→	4.	\$_3,204.82	\$			
	_ist all payroll deductions:						ì
J. <b>.</b>		5a.	\$ 602.39	\$			
	5a. Tax, Medicare, and Social Security deductions	5b.	\$ 192.30	\$			
	5b. Mandatory contributions for retirement plans		\$ <u>132.30</u>	\$			
	5c. Voluntary contributions for retirement plans	5c.	\$ 7.68				
	5d. Required repayments of retirement fund loans	5d.	\$ 7.70				
	5e. Insurance	5e.	000 00	\$			
	5f. Domestic support obligations	5f.	\$ 656.33				
	5g. Union dues	5g.	\$	\$			
	5h. Other deductions. Specify:	5h.	+ \$	+ \$			
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ <u>1,466.40</u>	\$			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>1,738.42</u>	\$			
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		_				
	monthly net income.	8a.	\$ <u> </u>	_ \$			
	8b. Interest and dividends	8b.	\$	\$			
	8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent					
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	•		
	8d. Unemployment compensation	8d.	. \$	<u> </u>	•		
	8e. Social Security	8e.	. \$				
	8f. Other government assistance that you regularly receive						
	Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: NON-FILING SPOUSE' CONTRIBUTION TO HOLD	nce 8f.	\$	\$	-		
	8g. Pension or retirement income	8g.	. \$		_		
	8h. Other monthly income. Specify:	8h.	. +\$	_ +\$	_		
9	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	_		
10	Calculate monthly income. Add line 7 + line 9.		s 1,738.42		٦_	s 1,738	₹ 42
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	0. \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$		\$1,738	·.¬∠
11	State all other regular contributions to the expenses that you list in <i>Sche</i> Include contributions from an unmarried partner, members of your household, friends or relatives.			commates, and other			
:	Do not include any amounts already included in lines 2-10 or amounts that are Specify: NON-FILING SPOUSE' CONTRIBUTION TO HOUSEH	not a	available to pay exp DEXPENSES		J. 1. <b>+</b>	\$2,300	0.00
12	Add the amount in the last column of line 10 to the amount in line 11. The	e resu	ult is the combined r	monthly income.		4.000	2.42
'-	Write that amount on the Summary of Your Assets and Liabilities and Certain	Statis	stical Information, if	it applies 1	2.	\$4,038	).42
						Combined monthly inco	ome
1 1	3. Do you expect an increase or decrease within the year after you file this  1. No.	iorm					
	Yes. Explain:						

Fill in this information to identify y	your case:			
Debtor 1 ARMANDO E. ZAV	Middle Name Last Name	Check if this	is:	
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An amend		alikina ah ankan 40
United States Bankruptcy Court for the:	Eastern District of California		ment showing postp as of the following	
Case number(If known)		MM / DD /	YYYY	
Official Form 106J				
Schedule J: You	ur Expenses			12/15
Ro as complete and accurate as no	ossible. If two married people are filinged, attach another sheet to this form	ng together, both are equally res . On the top of any additional pa	ponsible for supply ges, write your nam	ing correct e and case number
Part 1: Describe Your Hou	sehold			
1. Is this a joint case?				
✓ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a s	separate household?			
☐ No☐ Yes. Debtor 2 must fil	e Official Form 106J-2, <i>Expenses for</i> S	Separate Household of Debtor 2.	and the second s	anakan da da kacamatan da
Do you have dependents?  Do not list Debtor 1 and	☐ No ☑ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2.	each dependent		4.0	· Do
Do not state the dependents' names.		NON-FILING SPOUSE	42	☑ Yes
War and American		STEP-SON	18	U No ☑ Yes
		STEP-SON	14	☐ No ☑ Yes
				□ No
				Yes
				☐ No☐ Yes
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes		man ann a ma managa a cha - chaoinn Fall Ma	
Part 2: Estimate Your Ongo	oing Monthly Expenses			
Estimate your expenses as of you expenses as of a date after the ba applicable date. Include expenses paid for with no	on-cash government assistance if you it on Schedule I: Your Income (Office)	nental <i>Schedule J</i> , check the box ou know the value of	nent in a Chapter 13 at the top of the for Your exp	m and fill in the
	expenses for your residence. Includ		4. \$	900.00
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or	renter's insurance		4b. \$	
4c. Home maintenance, repair	, and upkeep expenses		4c. \$	
4d. Homeowner's association	or condominium dues		4d. \$	

Official Form 106J

Case 17-12875

Debtor 1

ARMANDO E. ZAVALA
First Name Middle Name

Last Name

Case number (if known)\_

			Your expenses:
	A Little Little Communication of the communication	5.	\$
5.	Additional mortgage payments for your residence, such as home equity loans	J.	
6.	Utilities:		s 330.00
	6a. Electricity, heat, natural gas	6a.	\$ 330.00 \$ 140.00
	6b. Water, sewer, garbage collection	6b.	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 420.00
	6d. Other. Specify:	6d.	500.00
7.	Food and housekeeping supplies	7.	\$ 500.00
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$ 100.00
10.	Personal care products and services	10.	\$100.00
11.	Medical and dental expenses	11.	\$50.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$ 350.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
46	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
16.	Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$ 397.00
	17b. Car payments for Vehicle 2	17b.	\$\$
	17c. Other Specify: *17b is non-filing spouse car payment	17c.	\$
	17d. Other Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

De	btor 1	ARMANDO E. ZAVALA  First Name Middle Name Last Name  Case number (case	f known)						
21.	Othe	r. Specify: DMV/SMOG FEES	21.	+\$48.00					
22.	Calc	ılate your monthly expenses.							
	22a.	Add lines 4 through 21.	22a.	\$4,038.00					
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$					
		Add line 22a and 22b. The result is your monthly expenses.	22c.	\$4,038.00					
				Annual Market and the desired and an annual programment and a desired programment and are are an engineering and an annual and are are a second and an annual and are are a second and are a second					
23.	Calcu 23a.	late your monthly net income.  Copy line 12 (your combined monthly income) from Schedule I.	<b>23a</b> .	\$4,038.42					
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$4,038.00					
	23c.	Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .	23c.	\$0.42					
24	Do ye	ou expect an increase or decrease in your expenses within the year after you file this form	?						
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?								
	<b>☑</b> N	0.							
	☐ Y	es. Explain here:							

		1			
Fill in this in	formation to ic	dentify your case:			
Debtor 1		E. ZAVALA			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		•
United States I	Bankruptcy Court	for the: Eastern District of C	alifornia		
Case number			·		
(If known)					☐ Check if this is an
					amended filing
Officia	L Form 1	06000			
	l Form 1				
Decl	aratio	n About an	Individual	<b>Debtor's Schedules</b>	12/15
If two mar	ried people are	e filing together, both are e	equally responsible for	r supplying correct information.	
You must	file this form v	vhenever you file bankrup	tcy schedules or amen	ided schedules. Making a false statement, conc	ealing property, or
obtaining	money or prop	perty by fraud in connection	on with a bankruptcy ca	ase can result in fines up to \$250,000, or impris	onment for up to 20
years, or t	oth. 18 U.S.C.	. §§ 152, 1341, 1519, and 35	571.		
	1				
	Sign Below	V			
<u></u>					
Did vo	u pay or agree	to pay someone who is N	OT an attorney to help	you fill out bankruptcy forms?	
□ No			-		:
		on KAREN ACORD		. Attach Bankruptcy Petition Preparer's Notice, Deci	aration and
TE TE	s. Name of pers	on to the transfer of the		Signature (Official Form 119).	aration, and
				Signature (Official Forth 119).	
i					;
Hadaa	nanalty of na-	ium. I doolara that I have r	and the cummany and	schedules filed with this declaration and	1
that th	ey are true an	jury, i uecrare triat i riave r d correct.	cau uic suilillary dilu	Solicadies lifed with this decidiation and	{

Signature of Debtor 2

Date 07 24 2017 MM / DD / YYYY

Fill in this	information to identify	vour case:				
	ARMANDO E. ZA					
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	Eastern District of Ca	alifornia			
Case numbe (If known)	er					Check if this is an
	,,					amended filing
	Form 107	ncial Affair	e for Indiv	iduale Filina f	or Bankruptcy	<i>y</i> 04/16
Be as comp	olete and accurate as p	ossible. If two marri ded, attach a separa question.	ed people are filing te sheet to this for	together, both are equal m. On the top of any addi	lly responsible for supplying tional pages, write your na	ng correct
Pait ii	Give Details About		us and where it	ou Lived Belole		
1. What is	s your current marital s	tatus?				
☑ Ма						
<b>∟</b> No	t married					
☑ No	the last 3 years, have so the last 3 years, have so the places you better 1:					Dates Debtor 2 `lived there
:				☐ Same as Debtor 1		Same as Debtor 1
:			From			From
	Number Street		То	Number Street		То
•			_	*******	7	
į	City	State ZIP Code	<del>-</del>	City	State ZIP Code	
1				☐ Same as Debtor 1		☐ Same as Debtor 1
			From	<u> </u>		From
	Number Street		To	Number Street		To
-	and a second of the second of		-			
	City	State ZIP Code	_	City	State ZIP Code	
3. Within	n the last 8 years, did ye	ou ever live with a s	pouse or legal equi	valent in a community pr	operty state or territory? (	Community property
states	and territories include A	rizona, California, Ida	ho, Louisiana, Neva	da, New Mexico, Puerto Ri	ico, Texas, Washington, and	Wisconsin.)
□ No	o s. Make sure you fill out	Schedule H: Your Co	odebtors (Official For	m 106H).		
:			,	,		
1 .	The Property of the Alberta	ting to a suppose to any application				

Part 2: Explain the Sources of Your Income

From January 1 of current year until the date you filed for bankruptcy:    Wages, commissions, bonuses, tips   Wages, commissions, bonuses, tips   Operating a business	Debtor 1 ARMANDO E. ZAVALA  First Name Middle Name Last Name		lame	Case number (if known)					
Debtor 1  Sources of income Check at that apply.  From January 1 of current year until the date you filed for bankruptcy:    Wages, commissions, bonuses, lips   Operating a business	4.	Fill in the total amount of income you received If you are filing a joint case and you have inco	I from all jobs and all busir	nesses, including part-tir	ne activities.	ndar years?			
Check all that apply.  Wages, commissions, bonuses, tips  Operating a business  Suvages, commissions, bonuses, tips  Operating a business  Supply.  Wages, commissions, bonuses, ti		Yes. Fill in the details.	Debtor 1	<u>.</u>	Debtor 2				
For last calendar year:  (January 1 to December 31, 2016  (January 1 to December 31, 2015  (January				(before deductions and		(before deductions and			
Comparison of the calendar year   Comparison of the calendar year before that:   Comparison of the calendar year of the calendar years of the cale		•	bonuses, tips	\$19,228.93	bonuses, tips	\$			
(January 1 to December 31, 2015   Operating a business   \$ 15,993.00   Operating a business   \$    5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.    No		(January 1 to December 31,2016)	bonuses, tips	\$ 33,391.80	bonuses, tips	\$			
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No  Pebtor 1  Sources of income peach source (before deductions and exclusions)  Prom January 1 of current year until the date you filed for bankruptcy:  \$		(January 1 to December 31, 2015	bonuses, tips	\$15,993.00	bonuses, tips	\$			
Yes. Fill in the details.  Debtor 1  Sources of income Describe below.  Describe below.  Gross income from each source (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income each source (before deductions and exclusions)  Sources of income Describe below.  Sources of income Describe below.  Sources of income Describe below.  Sources of income each source (before deductions and exclusions)  Sources of income Poscribe below.  Sources of income Describe below.  Sources of income each source (before deductions and exclusions)  Sources of income Poscribe below.	5.	Include income regardless of whether that incunemployment, and other public benefit paym	ome is taxable. Examples nents; pensions; rental inco	of other income are alinome; interest; dividends;	money collected from laws	uits; royalties; and			
Yes. Fill in the details.  Debtor 1  Sources of income Describe below.  Describe below.  Gross income from each source (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income each source (before deductions and exclusions)  Sources of income Describe below.		List each source and the gross income from e	each source separately. De	o not include income tha	t you listed in line 4.				
Sources of income Describe below.  Sources of income Describe below.  From January 1 of current year until the date you filed for bankruptcy:  Sources of income each source (before deductions and exclusions)  Gross income from each source (before deductions and exclusions)  Sources of income Describe below.  Sources of income each source (before deductions and exclusions)  Sources of income Describe below.  Sources of income each source (before deductions and exclusions)			<u> </u>						
Describe below.  Second source  Describe below.  Second source  Describe below.  Second source  Describe below.  Second source  Second source  Describe below.  Second source  Second source  Describe below.  Second source  Describe below.  Second source  Second source  Describe below.  Second source  Second source  Second source  Second source  Describe below.  Second source  Second source  Second source  Second source  Describe below.  Second source  Second source  Second source  Second source  Describe below.  Second source  Second source  Second source  Second source  Describe below.  Second source  Sec			Debtor 1		Debtor 2				
the date you filed for bankruptcy:  \$\$				each source (before deductions and		each source (before deductions and			
\$\$						\$			
· · · · · · · · · · · · · · · · · · ·						\$ \$			

\_\_\_\_\_ \$\_\_\_\_ \$\_\_\_\_\_ \$\_\_\_\_

For last calendar year:

(January 1 to December 31,  $\frac{2016}{7YYY}$ )

For the calendar year before that: (January 1 to December 31,  $\frac{2015}{YYYY}$ )

ARMANDO E.	ZAVALA
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イベルス	v	⊏.	$\angle \wedge$	٧,	۱L/	٦.

Last Name

Case number (if known)

Part 3:	List Certain Payments You Made Bef	ore You Filed	for Bankruptcy		
6. Are eiti	her Debtor 1's or Debtor 2's debts primarily	consumer debt	ts?		
	Neither Debtor 1 nor Debtor 2 has primari "incurred by an individual primarily for a pers During the 90 days before you filed for bankr	ly consumer de onal, family, or h	ebts. Consumer debts ar nousehold purpose."		(8) as
	During the 90 days before you med for banki	upicy, ald you p	ay any creditor a total or	\$6,425 of filole?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom yo total amount you paid that creditor. child support and alimony. Also, do	Do not include p	ayments for domestic su	upport obligations, such as	
	* Subject to adjustment on 4/01/19 and every	y 3 years after th	at for cases filed on or a	after the date of adjustment.	
<b>⊠</b> Ye∈	s. Debtor 1 or Debtor 2 or both have primari	lv consumer de	ebts.		
	During the 90 days before you filed for bankı			\$600 or more?	
	₩ No. Go to line 7.				
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payments.	or domestic supp ents to an attorno	oort obligations, such as ey for this bankruptcy ca	child support and ase.	Was this grouped for
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name	_	\$	\$	☐ Mortgage
	Creditor's Name				☐ Car
	Number Street	_			☐ Credit card
					Loan repayment
					☐ Suppliers or vendors
	City State ZIP Code	_			☐ Other
					e e e e e e e e e e e e e e e e e e e
			\$	\$	<b>D</b>
	Creditor's Name		Ψ		☐ Mortgage ☐ Car
	Number Street				Credit card
					☐ Loan repayment☐ Suppliers or vendors
					Other
	City State ZIP Code	<del></del>			Utner
	ALLE TO LONG TO MAKE A ME OF LONG TO LONG TO THE STANDARD	\$ 7	A		
	Creditor's Name	-	\$	\$	☐ Mortgage
	Creditor's Name				☐ Car
	Number Street				Credit card
	Number Street				<b></b>
	Number Street				Loan repayment
	Number Street				☐ Loan repayment☐ Suppliers or vendors

or 1	ARMANDO E. ZAVALA		(	Case number (if known)_	
	First Name Middle Name Last Name				
Inside corpo agen	in 1 year before you filed for bankruptcy, did y ers include your relatives; any general partners; re orations of which you are an officer, director, pers it, including one for a business you operate as a s as child support and alimony.	elatives of any o on in control, or	general partners; partners; partners; partners	artnerships of which nore of their voting	n you are a general partner; securities; and any managing
ZÍ N	lo.				
	res. List all payments to an insider.				
<u> </u>	res. List all payments to an insider.	Dates of	Total amount	Amount you still	Reason for this payment
		Dates of payment	paid	owe	Reason for this payment
			\$	\$	
	Insider's Name				
	Number Street	<del></del>			
					·
	City State ZIP Code	-			
	en e	•			
			\$	\$	•
	Insider's Name				r
	Number Street				,
	City State ZIP Code	_			
<b>A</b>	ude payments on debts guaranteed or cosigned b No Yes. List all payments that benefited an insider.	y an insider.  Dates of	Total amount	Amount you still	Reason for this payment
		payment	paid	owe	Include creditor's name
			\$	\$	
	Insider's Name				
	Number Street				
					;
		_			
	City State ZIP Code				
					to the second se
			\$	\$	<u> </u>
	Insider's Name		<del></del>	- ·	:
					T
					TOTAL PROPERTY OF THE PROPERTY
	Number Street				
		<del>_</del>			•
	City State ZIP Code				

Case 17-12875

Debtor 1

ARMANDO	E. ZAVALA		Case number (if known)	
First Name	Middle Name	Lact Name		

	in 1 year before you filed for bankruptcy, v all such matters, including personal injury case contract disputes.				
<b>₫</b> N	lo				
☐ Y	es. Fill in the details.				
	Na	ture of the case	Court or agency		Status of the case
	2				—— Dending
	Case title		Court Name	-	On appeal
			Ni mb as Classi		Concluded
	:		Number Street		Conduded
	Case number		City State	zIP Code	<u></u>
	+		1		
	0		<u> </u>		Pending
	Case title		Court Name		On appeal
			Number Street		Concluded
	0				_ 55,15,4555
	Case number		City State	ZIP Code	
	No. Go to line 11.  Yes. Fill in the information below.				
<u> </u>		Describe the proper	ty	Date	Value of the property
<u> </u>	es. Fill in the information below.	Describe the proper	ty	Date	Value of the property
<u> </u>		Describe the proper		Date	
<u> </u>	es. Fill in the information below.			Date	
<u> </u>	'es. Fill in the information below.  Creditor's Name		ned	Date	
<u> </u>	'es. Fill in the information below.  Creditor's Name	Explain what happe Property was Property was	ned repossessed. foreclosed.	Date	
<u> </u>	Creditor's Name  Number Street	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished.	Date	
<u> </u>	'es. Fill in the information below.  Creditor's Name	Explain what happe Property was Property was Property was	ned repossessed. foreclosed.	Date	
<u> </u>	Creditor's Name  Number Street	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.	Date	\$
<u> </u>	Creditor's Name  Number Street	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$
<u> </u>	Creditor's Name  Number Street  City State ZIP Code	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$
<u> </u>	Creditor's Name  Number Street	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$
<u> </u>	Creditor's Name  Number Street  City State ZIP Code	Explain what happe Property was Property was Property was Property was Describe the proper	ned repossessed. foreclosed. garnished. attached, seized, or levied. ty		\$
<u> </u>	Creditor's Name  City State ZIP Code  Creditor's Name	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied. ty		\$
<u> </u>	Creditor's Name  City State ZIP Code  Creditor's Name	Explain what happe Property was Property was Property was Property was Property was Explain what happe Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied. ty  ned		
<u> </u>	Creditor's Name  City State ZIP Code  Creditor's Name	Explain what happe Property was Property was Property was Property was Describe the proper	ned repossessed. foreclosed. garnished. attached, seized, or levied. ty  ned repossessed. foreclosed.		\$\$

ARMANDO E. ZAVALA Debtor 1 Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **2** No ☐ Yes. Fill in the details. Describe the action the creditor took Date action **Amount** was taken Creditor's Name Number Street City ZIP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ No ☐ Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Dates you gave Gifts with a total value of more than \$600 Describe the gifts Value per person the gifts Person to Whom You Gave the Gift

City

Number Street

Person's relationship to you

State ZIP Code

٠ _	RMANDO E. ZAVALA irst Name Middle Name	Last Name Case n	number (if known)
thin 2 y	years before you filed for ban	kruptcy, did you give any gifts or contributions wi	ith a total value of more than \$600 to any char
No			
Yes. F	Fill in the details for each gift or	contribution.	
	or contributions to charities total more than \$600	Describe what you contributed	Date you Value contributed
tilat	total more than 4000		· · · · ·
			;
Charity'	s Name	<del></del> .	<b></b> \$
Onlanty	o mains		•
		·	<b>\$</b>
Numbe	r Street		
			,
City	State ZIP Code		
No	or gambling?		
_	Fill in the details.		
Desc	cribe the property you lost and	Describe any insurance coverage for the loss	Date of your Value of prop
how	the loss occurred	Include the amount that insurance has paid. List per	loss lost nding insurance
		claims on line 33 of Schedule A/B: Property.	
	and a part of the second secon	100 to 10	\$
			Φ
1			
7/8 L	ist Certain Payments or 1	Transfers	
ou con	sulted about seeking bankrup	kruptcy, did you or anyone else acting on your bet otcy or preparing a bankruptcy petition? on preparers, or credit counseling agencies for service	
	ing attorniogo, bankruptog petitic	on properties, or order counseling agenties for service	20 Togaliou III your ballicuptoy.
No			
■ Yes.	Fill in the details.		
		Description and value of any property transferred	
Doros	on Who Was Paid		transfer was made
rerso	AT VALIO AND LAIO		
Numl	per Street	<del></del>	:
Numl	per Street	·	\$
Numi	per Street		\$
Numl	per Street		\$ \$
Numl	per Street State ZIP Co	de	\$ \$
		de	\$ \$

Person Who Made the Payment, if Not You

First Name Middle Name Last	Name			
	Description and value of any property t	ransferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				¢
Number Street	• • • • • • • • • • • • • • • • • • •			Ψ
				\$
City State ZIP Code			}	
o.,, o.a.o <u>o</u> ., o.a.o			T de variables	
Email or website address				
Person Who Made the Payment, if Not You				
ithin 1 year before you filed for bankrupt omised to help you deal with your credit o not include any payment or transfer that y No I Yes. Fill in the details.	tors or to make payments to your cre		,, ,	·
res. Fill lift the details.	Description and value of any property	transferred	Date payment or	Amount of paym
			transfer was made	
Person Who Was Paid			)	
Number Street	-		<del></del>	\$
				\$
City State ZIP Code  ithin 2 years before you filed for bankrul		transfer any property	to anyone, other th	\$an property
·	business or financial affairs? made as security (such as the granting of	of a security interest or	mortgage on your pro y or payments received ange	operty).
ithin 2 years before you filed for bankrup ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or  Describe any propert or debts paid in exch	mortgage on your pro y or payments received ange	operty). d Date transfe
ithin 2 years before you filed for bankrup ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you ha No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or  Describe any propert or debts paid in exch	mortgage on your pro y or payments received ange	operty). d Date transfe
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ARMANDO E. ZAVALA Debtor 1 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ☐ Yes. Fill in the details. Date transfer Description and value of the property transferred was made Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last balance before Last 4 digits of account number Type of account or Date account was closed, sold, moved, closing or transfer instrument or transferred Name of Financial Institution ☐ Checking XXXX-☐ Savings Number Street Money market ☐ Brokerage City State ZIP Code Other Checking Name of Financial Institution ■ Savings ☐ Money market Number Street ☐ Brokerage Other\_ City State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ₩ No ☐ Yes. Fill in the details. Who else had access to it? Do you still Describe the contents have it? ☐ No ☐ Yes Name of Financial Institution Name Number Street Number Street

ZIP Code

City

State

ZIP Code

<u> </u>		or place other than your home within 1	year before you filed for bankruptcy?	
1 .				
<b>'</b>	es. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you st
			,	have it?
			·	□ No
	Name of Storage Facility	Name		Yes
	Number Street	Number Street	<del></del> .	•
		City State ZIP Code `		
		City State Zir Code		1
w	City State ZIP Code	L MARCON.		•
art 9	Identify Property You Hold	or Control for Someone Else		
			erty you borrowed from, are storing for,	
	you note or control any property that s nold in trust for someone.	someone else owns? include any prope	erty you borrowed from, are storing for,	
V				
	Yes. Fill in the details.			
		Where is the property?	Describe the property	Value
			3 0 2	
	Owner's Name		•	\$
	Number Street	Number Street		
				)
			:	4
		City State ZIP Cod	:  e	¥ ,
	City State ZIP Code	City State ZIP Cod	e :	W cycle is a summarized to the control of the cycle is a summarized to the
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ARMANDO E. ZAVALA Debtor 1 Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Date of notice Environmental law, if you know it Governmental unit Governmental unit Name of site Number Street Number Street City State ZIP Code State ZIP Code 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ☐ Yes. Fill in the details. Status of the Court or agency Nature of the case case Case title\_ Pending Court Name On appeal ☐ Concluded Number Street Case number State ZIP Code Part 11: **Give Details About Your Business or Connections to Any Business** 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. ☐ Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Business Name Number Street Name of accountant or bookkeeper Dates business existed From \_\_\_\_\_ To \_\_\_\_ City ZIP Code State Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Business Name EIN: \_\_ \_ -\_ \_ \_ \_ \_ \_ \_ \_ Number Street Name of accountant or bookkeeper Dates business existed

State

From \_\_\_\_\_ To \_\_\_\_

	t Name	
and the second s	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN
Business Name	-	EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code	-	From To
hin 2 years before you filed for bankru titutions, creditors, or other parties.	uptcy, did you give a financial statement to anyone	about your business? Include all financial
No Yes. Fill in the details below.		
	Date issued	
Name	MM / DD / YYYY	
Number Street	_	
	_	
City State ZIP Code	-	
12. Sign Below		
nswers are true and correct. I understa	ent of Financial Affairs and any attachments, and I of and that making a false statement, concealing proper an result in fines up to \$250,000, or imprisonment f	erty, or obtaining money or property by fra
nswers are true and correct. I understa n connection with a bankruptcy case ca	and that making a false statement, concealing prop	erty, or obtaining money or property by fra
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Signature of Debtor 1  Date 07-24-2017  id you attach additional pages to Your  No Yes	and that making a false statement, concealing prop an result in fines up to \$250,000, or imprisonment f	erty, or obtaining money or property by fra or up to 20 years, or both.  g for Bankruptcy (Official Form 107)?

Fill in this inf	formation to id	entify your case:		
Debtor 1	ARMANDO First Name	E. ZAVALA  Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
	Bankruptcy Court	for the: Eastern District of Ca	lifornia	
Case number (If known)				

# Check if this is an amended filing

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's CALIF REPUB BANK/MECHANIC'S BANK	☐ Surrender the property.	☑ No
TIGHTO.  A CALL TO A CALL THE MAN WE WINDOWS AND THE THEORY IN THE MET A CALL THE THE THE MET A CALL THE	Retain the property and redeem it.	☐ Yes
Description of 2014 DODGE CHARGER property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occurring cook.	Retain the property and [explain]:	
Creditor's	✓ Surrender the property.	☑ No
name: CAPITAL ONE/KAWASAKI	Retain the property and redeem it.	Yes
Description of 2007 KAWASAKI NINJA property MOTORCYCLE	Retain the property and enter into a Reaffirmation Agreement.	
securing debt.	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
oodaniig dobi.	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occurring work.	Retain the property and [explain]:	

ARMAN	1D0	E.	<b>ZAVALA</b>
First Name	M	ddle	Name

Last Name

Caca	number	LIF known

	9.
	46.0

#### **List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□ No
Description of leased property:	Yes
essor's name:	□ No
Description of leased property:	Yes
_essor's name:	□ No
Description of leased property:	Yes
Lessor's name:	☐ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Signature of Debtor 2

Date 01 24 2017.

Official Form 108

Date \_\_\_\_\_

Fill in this i	nformation to ic	lentify the case:		
Debtor 1	ARMANDO E	. ZAVALA		
•	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo	or the: Eastern District of Ca	ılifornia	
Case number (If known)			Chapter	

## Official Form 119

# Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 2. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

#### Part 1:

**Notice to Debtor** 

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

The bankruptcy petition preparer KAREN L. ACORD

The bankruptcy petition preparer NANEN L. ACORD	has notified me of
Name	
any maximum allowable fee before preparing any document for filing	g or accepting any fee.
Signature of Debtor 1 acknowledging receipt of this notice	Date <u> </u>
Signature of Debtor 2 acknowledging receipt of this notice	Date

ARMANDO E. ZAVALA

Name Middle Name

Last Name

Case number (if known)

Part 2:

**Declaration and Signature of the Bankruptcy Petition Preparer** 

Under	penalty	of	perjury,	l declare	that:
-------	---------	----	----------	-----------	-------

KADENI ACODD

- am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer;
- I or my firm prepared the documents listed below and gave the debtor a copy of them and the *Notice to Debtor by Bankruptcy Petition*Preparer as required by 11 U.S.C. §§ 110(b), 110(h), and 342(b); and
- if rules or guidelines are established according to 11 U.S.C. § 110(h) setting a maximum fee for services that bankruptcy petition preparers may charge, I or my firm notified the debtor of the maximum amount before preparing any document for filing or before accepting any fee from the debtor.

KAREN L. ACORD					
Printed name	Title, if an	у	Firm name, if it applies		
1820 E. LAURA AVE.					
Number Street					
VISALIA	CA 9	33292	(559) 308-0981		_
City	State	ZIP Code	Contact phone		
or my firm prepared the d (Check all that apply.)  ✓ Voluntary Petition (Form 101  ✓ Statement About Your Socia (Form 121)  ✓ Summary of Your Assets and	) I Security Numbers	Schedule I (F	Form 106I)		e a part of each document that I check:  Chapter 11 Statement of Your Current Monthly Income (Form 122B)  Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Form 122C-1)
Certain Statistical Informatio		<b>-</b>	Financial Affairs (Form 107)		Chapter 13 Calculation of Your Disposable
Schedule A/B (Form 106A/B	)		Intention for Individuals Filing		Income (Form 122C-2)
Schedule C (Form 106C)			ter 7 (Form 108)	Ą	Application to Pay Filing Fee in Installments
Schedule D (Form 106D)		•	atement of Your Current		(Form 103A)
Schedule E/F (Form 106E/F	)	_ ′	ome (Form 122A-1)	ч	Application to Have Chapter 7 Filing Fee Waived (Form 103B)
Schedule G (Form 106G)  Schedule H (Form 106H)			f Exemption from Presumption der § 707(b)(2) 1Supp)	Ø	A list of names and addresses of all creditors (creditor or mailing matrix)
_ calculati (Form 1001)		Chapter 7 M (Form 122A-	eans Test Calculation 2)		Other

Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the documents to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110.

Signature of bankrooksy petition preparer or officer, principal, responsible person, or partner

5 6 1 - 7 4 - 7 8 4 2
Social Security number of person who signed

Date MM DD / YYYY

KAREN L. ACORD

Printed name

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner

Social Security number of person who signed

te \_\_\_\_

Printed name

ш	$\alpha$ :	

		Case 17-1207
nation to ide	ntify your case:	
		Last Name
vame	WINDOIS WATER	2001/12/110
Name	Middle Name	Last Name
ruptcy Court for	the: Eastern District of C	alifornia
	MANDO E. Name	

Check one box only as	directed in	this	form	and	in
Form 122A-1Supp:					

- 1. There is no presumption of abuse.
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

#### Official Form 122A-1

## **Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - Married and your spouse is NOT filing with you. You and your spouse are:
    - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
    - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Column A

Column B

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filling on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

ACTION OF THE PROPERTY OF THE PARTY OF THE P							Debtor	1	Debtor 2 or non-filing spouse
- erobenenenenen Anne de	2.	Your gross wages, salary, tips, bonuses, overtime, ar (before all payroll deductions).	nd cor	nmissio	ons		\$ <u>3,2</u>	04.82	\$
MARKANIA WALLANDA	3.	<b>Alimony and maintenance payments.</b> Do not include p Column B is filled in.	aymer	nts from	a spouse it	•	\$	0.00	\$
Manager som payable supposes some supposes of the supposes of	4.	All amounts from any source which are regularly paid of you or your dependents, including child support. If from an unmarried partner, members of your household, and roommates. Include regular contributions from a spofilled in. Do not include payments you listed on line 3.	nclude your d	e regula: lepende	r contribution Ints, parents	ns s,	\$ <u>2,3</u>	00.00	\$
	5.	Net income from operating a business, profession, or farm Gross receipts (before all deductions)	Debt	or 1 0.00	Debtor 2				
-		Ordinary and necessary operating expenses	- \$_	<u>0.00</u> -	- \$				
AND REPORT AND PROPERTY OF THE		Net monthly income from a business, profession, or farm	\$_	0.00	\$	Copy here→	\$	0.00	\$
N 2 WAY & WARRANTON AND AND AND AND AND AND AND AND AND AN	6.	Net income from rental and other real property Gross receipts (before all deductions)	Debt	0.00	Debtor 2 \$				
*********		Ordinary and necessary operating expenses	- \$_	0.00	- \$				
*		Net monthly income from rental or other real property	\$_	0.00	\$	Copy here→	\$	0.00	\$
MALL CHANGE ACCOUNT	7.	Interest, dividends, and royalties	-				\$	0.00	\$

Debtor 1 ARMANDO E. ZAVALA First Name Middle Name Last Ne	me	Case number (if known)						
i not traille middle Naille Last Ne		0.1	Caluma C					
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse					
8. Unemployment compensation		\$0.00	\$					
Do not enter the amount if you contend that the under the Social Security Act. Instead, list it he								
For youFor your spouse								
Pension or retirement income. Do not includ	<u> </u>							
benefit under the Social Security Act.		\$0.00	\$					
10. Income from all other sources not listed ab Do not include any benefits received under the as a victim of a war crime, a crime against hun terrorism. If necessary, list other sources on a	Social Security Act or payments rece nanity, or international or domestic							
0		\$ <u>         0.0</u> 0	\$					
0	<del></del>	\$ <u>0.0</u> 0	\$					
Total amounts from separate pages, if any.		+ \$ 0.00	+ \$					
11. Calculate your total current monthly incom column. Then add the total for Column A to the	e. Add lines 2 through 10 for each e total for Column B.	\$ <u>5,504.8</u> 2	+ \$ = \begin{align*} = \begin{align*} \\$ 5,504.82 \\ \text{Total current monthly income} \end{align*}					
Part 2: Determine Whether the Means	Test Applies to You		,					
12. Calculate your current monthly income for								
12a. Copy your total current monthly income	from line 11		Copy line 11 here → \$\ 5,504.82					
Multiply by 12 (the number of months in	a year).		x 12					
12b. The result is your annual income for this	s part of the form.		12b. \$ <u>66,057.84</u>					
13. Calculate the median family income that ap	pplies to you. Follow these steps:							
Fill in the state in which you live.	CA							
Fill in the number of people in your household	4							
Fill in the median family income for your state	and size of household.		<u>13.</u> \$ <u>84,059.00</u>					
To find a list of applicable median income amoinstructions for this form. This list may also be								
14. How do the lines compare?								
14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3.								
14b. Line 12b is more than line 13. On the Go to Part 3 and fill out Form 122A—	top of page 1, check box 2, <i>The pres</i> 2.	sumption of abuse is de	etermined by Form 122A-2.					
Part 3: Sign Below								
By signing here, I declare under pena	lty of perjury that the information on th	nis statement and in an	y attachments is true and correct.					
· 1 G 2	. *	•						
Signatura of Dahtor 1		Signature of Debtor 2						
Signature of Debitor 1		Signature of Debiol 2						
Date <u>07 24 2017</u> MM / DD /YYYY		Date MM / DD / YY	<del>YY </del>					
If you checked line 14a, do NOT fi	ll out or file Form 122A-2.							
If you checked line 14b, fill out For	rm 122A-2 and file it with this form.							

B2800 (Form 2800) (12/15)

# United States Bankruntoy Court

EASTERN District OfCALIFORN	IIA									
In re Akyando E. Zavaja	Case No.									
Debtor	Chapter 7									
<b>DISCLOSURE OF COMPENSATION OF BANKRUPTCY P</b> [Must be filed with the petition if a bankruptcy petition preparer prepares th	ETITION PREPARER e petition. 11 U.S.C. § 110(h)(2).]									
Under 11 U.S.C. § 110(h), I declare under penalty of perjury that I am not an attorney or employee of an attorney, that I prepared or caused to be prepared one or more documents for filing by the above-named debtor(s) in connection with this bankruptcy case, and that compensation paid to me within one year before the filing of the bankruptcy petition, or agreed to be paid to me, for services rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:										
For document preparation services I have agreed to accept	\$ <u>125</u>									
Prior to the filing of this statement I have received	<u>\$ 125 </u>									
Balance Due	\$0									
2. I have prepared or caused to be prepared the following documents (ite	mize):									
CHAPTER 7 BANKRUPTCY PETITION and provided the following services (itemize):										
The source of the compensation paid to me was:  X Debtor Other (specify)										
4. The source of compensation to be paid to me is:  Debtor Other (specify)										
5. The foregoing is a complete statement of any agreement or arrangement for payment to me for preparation of the petition filed by the debtor(s) in this bankruptcy case.										
6. To my knowledge no other person has prepared for compensation a document for filing in connection with this bankruptcy case except as listed below:										
NAME SOCIAL SECURITY NUMBER										
Signature - 561-74-7842 Social Security number of bankr	1 24 / 7 Date									
Signature Social Security number of bankr KAREN L ACORD 1820 E. LAURA AVE., VISALIA	. ,									
Printed name and title, if any, of Address  Bankruptcy Petition Preparer  Address										

- \* If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. § 110).
- A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.